Form 9-331 Dec. 1973

N. M. OIL CONS. COMMISSION P. O. Boy 1080 HOBBS, NEW MEXICO

Form Approved. Budget Bureau No. 42-R1424

DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY	88 340 EASE <i>LC - 031695 (b)</i> 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.) 1. oil gas well other 2. NAME OF OPERATOR CONOCO INC. 3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, N.M. 88240 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 1650 FSL \$890 FEL AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	8. FARM OR LEASE NAME Warren Unit 9. WELL NO. 86 10. FIELD OR WILDCAT NAME Warren Mc Ree 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec., 29 T-205 R-38E 12. COUNTY OR PARISH Lea NM
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE: REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other)	Carate Santa

DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

The 95/8" intermediate casing will not be run in the subject well due to the fact that no waterflows or lost-circulation zones were encountered.

Subsurface Safety Valve: Manu. and Type		Set @ Ft.
18. I hereby certify that the foregoing is to	rue and correct	
SIGNED MARIE TO THE ROOT ROOT A CHAPMAN	TITLE Administrative Supervisor DATE	January 20,1982
	(This space for Federal or State office use)	<i>(</i>
APPROVED BY FEB 1 1982 CONDITIONS OF APPROVAL, IF ANY:	TITLE DAT	E
U.S. GEOLOGICAL SURVEY		